## MARRIAGE

The following is a complete list of data items **reported** to the Missouri Department of Health and Senior Services during registration of marriage. These data elements are obtained from the Application/Report of Marriage form for all **marriages** reported to the state.

License Number

Marriage State File Number

Groom Name (First, Middle, Last)

Groom SSN

Groom Current Age

Groom Date of Birth (Month, Day, Year)

Groom Birthplace State or Foreign Country

Groom Residence City/Town

Groom Residence State

Groom Residence Zip Code

**Groom Residence County** 

Groom # of This Marriage

Groom Last Marriage Ended By -

Death

Divorce, dissolution, or annulment

Groom Last Marriage End Date (Month, Year)

Groom Race (White, Black, American Indian, Other)

Groom Education (highest grade completed)

Bride Name (First, Middle, Last)

Bride Maiden Surname (if different)

Bride SSN

Bride Current Age

Bride Date of Birth (Month, Day, Year)

Bride Birthplace State or Foreign Country

Bride Residence City/Town

Bride Residence State

Bride Residence Zip Code

Bride Residence County

Bride # of This Marriage

Bride Last Marriage Ended By -

Death

Divorce, dissolution, or annulment

Bride Last Marriage End Date (Month, Year)

Bride Race (White, Black, American Indian, Other)

Bride Education (highest grade completed)

**Groom Signature** 

Bride Signature

'Sworn To' Date and Time (Month, Day, Year) (Time)

County of Application

Date and Time License Issued (Month, Day, Year) (Time)

Name of Recorder of Deeds

Signature and Title of Official

Date of Marriage (Month, Day, Year)

City/Town Where Marriage Occurred

County Where Marriage Occurred

If Groom is a Minor -

Name of Parent or Legal Guardian

Relationship to Applicant

Parent/Legal Guardian Address

Parent/Legal Guardian State

Parent/Legal Guardian Zip Code

Parent/Legal Guardian Signature

If Bride is a Minor -

Name of Parent or Legal Guardian

Relationship to Applicant

Parent/Legal Guardian Address

Parent/Legal Guardian State

Parent/Legal Guardian Zip Code

Parent/Legal Guardian Signature

Parental Consent 'Sworn To' Date (Month, Day, Year)

Signature and Title of Official Certifying Parental Consent